

2018 Children's Community Options Program (CCOP) Guidelines

If any of the below items/services could potentially be funded through other programs/funding sources they must be looked into first including Children's Long Term Support (CLTS) Waivers, as CCOP funding is the funding of last resort. For many of the below items/services a denial from Wisconsin Medicaid and/or private insurance is required. Written recommendations from an appropriate professional, therapist, or physician may also be required for some of the items/services.

112.99 – Adaptive Aids - Other

Adaptive aids include controls or appliances which enable people to increase their ability to perform Activities of Daily Living or control the environment in which they live. Adaptive aids are also services and material benefits which enable children to access, participate and function in the community. Examples of Adaptive Aids may include: Hygiene/meal preparation aids, environmental control units, accessible computer keyboard, adaptive security systems, adaptive door handles and locks, adaptive bike or tricycle, adaptive accessories, computer and necessary software, control switches, pneumatic devices including sip and puff controls, electronic control panels, over the bed tables, portable ramps, standing board/frames, scald preventing showerhead, specialized clothing, and talking alarm clocks.

This service may also include the initial purchase of a service animal and routine veterinary costs for a service animal. Wisconsin Statute 106.52 (1) (fm) states: "Service animal" means a guide dog, signal dog, or other animal that is individually trained or is being trained to do work or perform tasks for the benefit of a person with a disability, including the work or task of guiding a person with impaired vision, alerting a person with impaired hearing to intruders or sound, providing minimal protection or rescue work, pulling a wheelchair, or fetching dropped items.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver Program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

112.57 – Adaptive Aids – Vehicle-Related

Adaptive aids that enable children to access participate and function in the community. These include the purchase of vehicle modifications (such as van/vehicle lifts/transfer unit that are either manual, hydraulic or electronic, hand controls for youth learning to drive, equipment modifications, etc.) that allow the vehicle to be used by the participant to access the community, or those costs associated with the maintenance of repair of these items.

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202.01 – Adult Family Home – 1-2 bed (not room and board)

Adult family home is a residence where one to two persons live and in which care, treatment or support or service above the level of room and board is provided as a primary function of the facility. The residence is the primary domicile of the Adult Family Home operation(s). Only the costs directly associated with participant care, support and supervision in the adult family home may be billed under this service. No costs associated with room and board of the residents may be billed to CCOP.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

202.02 – Adult Family Home – 3-4 bed (not room and board)

Adult family home is a residence where one to four persons live and in which care, treatment or service above the level of room and board is provided as a primary function of the facility. The residence is the primary domicile of the Adult Family Home operator(s). Only the costs directly associated with participant care, support and supervision in the adult family home may be billed under this service. No costs associated with room and board of the residents may be billed CCOP.

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112.47 – Assistive Technology/Communication Aids

Communication aids/assistive technology aids means an item, piece of equipment or product system, whether acquired commercially, modified or customized, that is used to increase, maintain or improve functional capabilities of children at home, work and in the community. Assistive technology service means a service that directly assists the child/youth in the selection, acquisition, or use of an assistive technology device. Assistive technology includes:

- a. The evaluation of the assistive technology needs of a child, including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the child in the customary environment of the child;
- b. Services consisting of purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for children;
- c. Services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing or replacing assistive technology devices;
- d. Coordination and use of necessary therapies, interventions or services with assistive technology devices, such as therapies, intervention or services, associated with other services in the service plan;
- e. Training or technical assistance for the child/youth, or where appropriate, the family members, guardians, advocates or authorized representatives of the child; and
- f. Training or technical assistance for professionals or other individuals, who provide services to, employ or are otherwise substantially involve in the major life functions of children.

Assistive technology includes communication aids that are devices or services needed to assist children with hearing, speech, communication or vision impairments. These items or services assist the individual to effectively communicate with service providers, family, friends and the general public; decrease reliance on paid staff; increase personal safety; enhance independence; and improve social and emotional well-being. Interpreter services are provided to people with hearing impairments and who require sign language translation to effectively communicate with people in the community, employees or others. Individual interpreters must be on the state or national interpreter registry.

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101.00 – Child Care Services

Child Care services includes the provision of supplementary child care staffing necessary to meet the child's exceptional care needs above and beyond the cost of basic child care that all families with young children may incur. Child care services may include supplementary supports and supervision services to address exceptional emotional or behavioral needs, or physical or personal care needs for eligible participants. Child care services may include, but are not limited to services offered by the Department of Children and Families (DCF) licensed or certified family day care, group day care and day camps. In addition, child care services may be delivered by providers chosen by the parent/guardian that meet the DHS child care training and work experience qualification requirements. Funding can be used to cover costs for child care services when a child has aged out of his or her traditional child care settings (typically up to age 12), but due to the child's disability continues to require care or supervision when the parent/guardian is working or training. Examples include school and community-based settings that children of that age typically participate (e.g., after school programs, 4-H clubs, family residence etc.). The entire cost of the child care for participants age 12 years and over may be covered under the CLTS Waiver Program.

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In addition to the child care services defined above, CCOP can pay for child care for siblings. The intent of expanding available child care services under CCOP is to support the family system with respect to an identified outcome. This service may provide the opportunity, for example, for parents to spend time with the child with a disability while siblings are with a child care provider. It may be used to pay respite providers to simultaneously care for siblings without disabilities in order to relieve the participant's primary caregiver(s) from care demands. It is not intended to be used in place of respite services or to pay for child care while a parent works.

203.00 – Children's Foster Care (not room and board)

A Foster Home is a family-oriented residence operated by a person licensed under s.48.62 of the Wisconsin Statutes and DCF 56 of the Wisconsin Administrative Code as a Foster Home. This service includes supplementary intensive supports and supervision services beyond the maintenance payment made to foster parents and is to address exceptional emotional or behavioral needs, or physical or personal care needs.

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514.00 – Community Integration Services

Community Integration Services include services and supports that are identified by the child/parent and the multidisciplinary team as necessary to support a child and family within a community setting base on their strengths and needs. Community Integration services programs benefits families with children who have mental health and/or behavioral concerns by providing intensive case coordination and individualized community based services. Community Integration Services are services designed to provide a bundled array of services that extends beyond the traditional financial and geographic boundaries to develop a creative and flexible continuum of care. Typical services include; daily living skills, mentoring, parent education and training, community integration activities and behavior interventions, development and nurturing of natural supports, transportation and respite services. The outcome of this program is to assist, empower and build upon the strengths of the child and family so that the child can be fully integrated into the community with their family.

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113.00 – Consumer Education and Training

The provision of consumer education and training services helps the participant acquire the skills needed to exercise control and responsibility over their other supportive services. Covered expenses may include enrollment fees, books and other educational materials and transportation related to participation in training courses, conferences and other similar events that address the objective of this service category. This service includes education and training for participants, their parents/guardians or caregivers that is directly related to building or acquiring the participant's skills as described in the definition above.

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507.03 – Counseling and Therapeutic Services - Hours

Counseling and therapeutic services includes the provision of professional evaluation and consultation services to participants identified needs for physical, personal, social, cognitive, developmental, emotional, or substance abuse services. The goal of counseling and therapeutic services is to maintain or improve participant health, welfare or functioning in the community. The therapy service may be provided in a natural setting or in a service provider's office. Includes therapies provided by state licensed or certified medical professionals which are not available under the Medicaid State Plan. Providers of counseling and therapeutic services shall deliver services limited to their areas of formal education and training, as directed by their professional code of ethics.

Any counseling or therapeutic service funded by the program must address an individual's assessed need and be directly related to a therapeutic goal. Services may include assistance with interpersonal relationships, music therapy, art therapy, hippo therapy, equine assisted therapy, and day/summer camp. Counseling and therapeutic services must meet clearly defined outcome, be proven effective for the child's condition or outcome and be cost effective.

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110.00 Daily Living Skills Training

Daily living skills training services provide education and skill development or training to improve an individual's ability to independently perform routine daily activities and effectively utilize community resources. Services are instructional, focused on skill development and are not intended to provide substitute task performance. This service includes funding for educational or training services that are of a direct benefit to the child.

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706.20 – Day Services - Children

Day Services are the provision of services that provide children with regularly scheduled activities for part of the day. Services include coordination and intervention directed at skill development and maintenance, physical health promotion and maintenance, language development, cognitive development, socialization, social and community integration, and domestic and economic management. Services are typically provided up to five days per week in a non-residential setting and may occur in a single physical environment or in multiple environments, including natural settings in the community. Coordination activities may involve the implementation of components of the child's family-centered and individualized service plans and may involve family, professionals, and others involved with the child as directed by the child's plan.

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112.50 – Dental and Medical Care (non-MA eligible children only)

Children with disabilities who are not eligible for Medicaid can access dental and medical care through CCOP. Primary or specialized dental and medical care, diagnosis, and evaluation includes, but is not limited to, services that are necessary to maintain or improve a child's health, welfare, or functioning in their home and community. The treatment, service, or evaluation must be recommended or prescribed by the child's dentist, physician, therapist, or psychologist, along with a reason for its necessity. Documentation of efforts to obtain the service through other funding sources must be maintained in the child's file.

619.00 – Financial Management/Fiscal Intermediary Services

Financial Management Services are those services that assist participants and their families to manage waiver service funding. This service involves a person or agency paying service providers after the county waiver agency and/or the participant's, parent/guardian has authorized payment for delivered services included in the participant's approved Individualized Service Plan (ISP). Financial Management Service providers, sometimes referred to as fiscal intermediaries, are organizations or individuals that issue payments for personnel cost, tax withholding, unemployment insurance, worker's compensation, health insurance and other taxes and benefits appropriate for the specific provider consistent with the individual's ISP. The financial management service provider or fiscal intermediary serves upon the authorization of the county waiver agency and is made available to the participant/family to ensure appropriate compensation is issued to providers of services. The Financial Management Services provider is accountable for insuring compliance with all federal and state laws associated with tax withholding and all other employee benefits.

This service also includes paying bills authorized by the participant or their guardian, keeping an account of disbursements and assisting the participant to ensure sufficient funds are available for his or her needs.

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606.00 – Health Screening and Accessibility (non-MA eligible children only)

Children with disabilities who are not eligible for Medicaid can access health screening and health care services through CCOP. Services may include, but are not limited to: case finding; assessment/diagnosis; case planning, monitoring, and review; referral; and advocacy. Providing services in a natural or supportive service setting to persons at risk of health problems for the purpose of early identification of health care needs or improved accessibility to needed health care services can be billed under this SPC. Health screening that is provided as part of an overall client assessment process must be classified as either an intake assessment or, if an integral part of another program, under that program.

112.56 – Home Modifications

Home modifications include services designed to assess the need for, arrange for and provide modifications and/or improvements to a child's residence that address a need identified to improve health, safety, accessibility or provide for the maximization of independent functioning. Home modifications are generally permanent fixtures/changes to a physical structure. Home modifications include the cost of the permit to authorize the changes, the materials, and services needed to complete the installation of specific equipment, the modification of the physical structure or the reconfiguration of essential systems within the home.

Home Modifications may include adaptations, including, but not limited to:

Ramps (fixed), ramp extensions and platforms; porch/stair lifts; doors/doorways, door handles/door opening devices; adaptive door bells, locks/security items or devices; plumbing, electrical modifications related to adaptations; medically necessary heating, cooling or ventilation systems; shower, sink, tub and toilet modifications; faucets/water controls; accessible cabinetry counter tops or work surfaces; grab bars, handrails, accessible closets; smoke/fire alarms and fire safety adaptations; adaptive lighting/light switches; flooring and /or floor covering to address health and safety; wall protection.

Modifications not specifically described above may be approved if the item or service meets the definition and the standards for allowable home modifications. Home modifications increase self-reliance and independence, or ensure safe, accessible means of ingress/egress to a participant's living quarters, or otherwise provide safe access to rooms, facilities or equipment within the participant living quarters, or adjacent buildings that are part of the residence.

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106.02 – Housing Assistance (utilities only)

CCOP can pay for additional utility costs that are incurred as the result of a child's disability, including heating, cooling, water, electricity, etc. A qualified professional must identify the conditions and supports that result in the increased utility costs. Most local providers of public utilities can provide estimates and calculations of anticipated costs. Using the most energy-efficient strategy is advisable, and administering agencies are encouraged to work with the family to explore eligibility for energy assistance programs.

610.00 - Housing Counseling

Housing Counseling is the provision of services to participants to provide comprehensive guidance on housing opportunities available to meet their needs and preferences. This service includes guidance on how a participant may gain access to available public and private resources to assist the person to obtain or retain safe, decent, accessible, and affordable housing and avoid institutionalization. Housing Counseling includes planning, guidance and assistance in accessing resources related to home ownership, financing, accessibility and architectural services and consultation, as well as health and safety evaluations of physical

property. The provider delivers consultation by meeting with the participant and their family and collecting individual specific information. This information is used to provide guidance and assistance which is appropriate to the individual situation.

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513.00 Mentoring

Mentoring services are supports intended to improve the participant's ability to interact in their community in socially appropriate ways. The mentor provides the participant with such services as peer interaction, social/recreational and employability skill-building opportunities. The mentor supports the participant by practicing, modeling, guiding, and shadowing them in the community. Interventions are spontaneous and in real-life situations rather than in a classroom type environment. Covered expenses may include meals, admission fees, and transportation for the mentor related to participation in community events that address the objectives and meet the identified outcomes of the child's service plan.

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710.00 Nursing Services

Nursing services are those medically necessary, skilled nursing services that may only be provided safely and effectively by a nurse practitioner, a registered nurse, or a licensed practical nurse working under the supervisor of a registered nurse. The nursing services provided must be within the scope of the Wisconsin Nurse Practice Act and are not otherwise available to the participant under the Medicaid state plan or Healthcheck/EPSDT. Nursing services may include periodic assessment of the participant's medical condition when the condition requires a skilled nurse to identify and evaluate the need for medical intervention or to monitor and /or modify the medical treatment services provided by non-professional care providers. Services may also include regular, ongoing monitoring of a participant's fragile or complex medical condition as well as the monitoring of a participant with a history of noncompliance with medication or other medical treatment needs. The need for skilled nursing services must be recommended or prescribed by the participant's physician and reviewed by the support and service coordinator.

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112.46 – Personal Emergency Response System (PERS)

Personal emergency response system (PERS) provides a direct telephonic, global positioning system (GPS) or other electronic communication link between someone living in the community and health professionals to secure immediate response and assistance in the event of a physical, emotional or environmental emergency. This service may include devices and services necessary for operation of PERS when otherwise not available. This service may also include installation, upkeep and maintenance of devices or systems as appropriate. Electronic devices must meet Underwriters Laboratories (UL) Standards. Telephonic devices must meet Federal Communications Commission (FCC) regulations.

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403.01 – Recreation/Alternative Activities

The primary purpose of recreation and alternative activities is to support the child's inclusion with their family and peers (with or without disabilities) in social and recreational programs in the community and at school. Funds may be utilized for child/family-specific, outcome-based goods and services. CCOP funding can pay for recreational fees and other goods and services that promote community inclusion. It can cover fees for the whole family (e.g., to join a recreation club, for family recreation, camping, etc.) or when a child

needs the assistance of an attendant in order to participate in family or community activities. CCOP funding can also be used to pay for attendant support during a family vacation, specialized transportation, and the rental of adaptive equipment.

106.00 Relocation Services

Relocation services are services and essential items needed to establish a community living arrangement for children who are relocating from an institution, foster home or who are moving out of the family home to a less restrictive or independent setting. This service includes person-specific services, supports or goods that will be put in place in preparation for the child/youth relocation to a safe, accessible and affordable community living arrangement. Relocation services may include the purchase of necessary furniture, telephone(s), cooking/serving utensils, basic cleaning equipment, household supplies, bathroom and bedroom furnishings and kitchen appliances not otherwise included in a rental arrangement if applicable. Relocation services may include the payment of a security deposit, utility connection costs and telephone installation charges. This service includes payment for moving the child/youth's personal belongings to the new community living arrangement and general cleaning and household organization services needed to prepare the selected community living arrangement for occupancy.

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103.26 – Respite – Home Based

Respite care services are services provided for a child on a short-term basis to ease the child's family or other primary caregiver(s) from daily stress and care demands. When respite care service is provided in the home of the participant it is defined as Home Based Respite. Home based respite care services may be provided in partial day or overnight increments. Costs for room and board in these settings may not be included in the charge to CCOP. The actual length of respite stay must be specified in the participants ISP.

*****A respite care wage tool is available to help determine an appropriate rate base on the care needs of the child and duties expected to be performed. Rates can be hourly up to the maximum daily rate associated to the hourly rate.*****

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103.24 – Respite – Institutional

Respite care services are services provided for a child on a short-term basis to ease the child's family or other primary caregiver(s) from daily stress and care demands. Institutional respite care requires prior approval from the Department, except in an emergency situation. Institutional respite services may involve over night or partial day stays by the participant. Costs for room and board in these settings may be included in the charge to CCOP. The actual length of the respite stay must be specified in the participants ISP.

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103.99 – Respite - Other Setting

Respite care services are services provided for a child on a short-term basis to ease the child's family or other primary caregiver(s) from daily stress and care demands. Other Setting Respite services may be provided in a home other than the home of the participant or in another setting. Services may involve overnight or partial day stays by the participant. The actual length of the respite stay must be specified in the ISP.

*****A respite care wage tool is available to help determine an appropriate rate base on the care needs of the child and duties expected to be performed. Rates can be hourly up to the maximum daily rate associated to the hourly rate.*****

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term

Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

103.22 – Respite – Residential

Respite care services are services provided for a child on a short-term basis to ease the child's family or other primary caregiver(s) from daily stress and care demands. Residential respite may involve overnight stays or partial day stays by the participant. Costs for room and board in these settings may be included in the charge to CCOP. The actual length of the respite stay must be specified in the participant's ISP. Services may be provided in the following Medicaid certified institutional setting: Hospital, Nursing Home, or Intermediate Care Facility for the Intellectually Disabled.

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112.52 – Specialized Clothing

CCOP funds may be used to purchase specialized clothing or footwear that is customized to accommodate a child's unique physical or care needs.

112.51 – Specialized Diet/Nutrition

CCOP can be used to purchase supplemental nutrition that is required to meet special dietary requirements. Within limits, CCOP funds can be used to offset the additional cost of specialized food or nutritional items not otherwise covered by Medicaid. Special dietary needs would typically be determined by a qualified medical professional, registered dietitian, or other professional who is qualified to assess a child's nutritional needs, monitor health and growth, and make recommendations for achieving desired outcome in the ISP.

112.51 – Specialized Diet/Nutrition

CCOP can be used to purchase supplemental nutrition that is required to meet special dietary requirements. Within limits, CCOP funds can be used to offset the additional cost of specialized food or nutritional items not otherwise covered by Medicaid. Special dietary needs would typically be determined by a qualified medical professional, registered dietitian, or other professional who is qualified to assess a child's nutritional needs, monitor health and growth, and make recommendations for achieving desired outcomes in the ISP.

112.55 Specialized Medical and Therapeutic Supplies

Specialized medical and therapeutic supplies include items necessary to maintain the participant's health, manage a medical or physical condition, improve functioning or enhance independence. The cost of items, or devices provided may be in excess of the quantity of medical equipment or supplies covered under the Medicaid state plan, when coverage of the additional items or devices is denied. Items or devices provided must demonstrate direct medical or remedial benefit to the participant

Allowable items may include books and other therapy aids designed to augment a professional therapy or treatment plan. Room air conditioners, air purifiers, humidifiers and water treatment systems.

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107.50 – Specialized Transportation – Items

Specialized transportation is the provision of services to permit a program participant's access to the community to obtain services, use necessary community resources and participate in community life. Specialized transportation services may include the pre-purchase or provision of such items as tickets, passes, vouchers or other fare medium or may include a direct payment to providers covering the cost of conveyance. Services may also include the development of a standing participant account between the

agency and the transportation provider.

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In addition to the transportation services defined under SPC 107.50 in the Waiver Manual, within limits, CCOP can pay for food and/or lodging for parents/guardians, siblings, and/or someone accompanying the family when the travel is related to the child's health but is not otherwise covered by Medicaid.

107.40 – Specialized Transportation – Miles

Specialized transportation is the provision of services to permit a program participant's access to the community to obtain services, use necessary community resources and participate in community life. Specialized transportation services may include the pre-purchase or provision of such items as tickets, passes, vouchers or other fare medium or may include a direct payment to providers covering the cost of conveyance. Services may also include the development of a standing participant account between the agency and the transportation provider.

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In addition to the transportation service defined under SPC 107.40 in the Waiver Manual, within limits, CCOP can pay for transportation or mileage for parents/guardians, siblings, and/or someone accompanying the family to waiver-allowable services or when the travel is related to the child's health but is not otherwise covered by Medicaid.

107.30 – Specialized Transportation – One-Way Trips

Specialized transportation is the provision of services to permit a program participant's access to the community to obtain services, use necessary community resources and participate in community life. Specialized transportation services may include the pre-purchase or provision of such items as tickets, passes, vouchers or other fare medium or may include a direct payment to providers covering the cost of conveyance. Services may also include the development of a standing participant account between the agency and the transportation provider.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2012.

In addition to the transportation service defined under SPC 107.30 in the Waiver Manual, within limits, CCOP can pay for transportation or mileage for parents/guardians, siblings, and/or someone accompanying the family to waiver-allowable services or when the travel is related to the child's health but is not otherwise covered by Medicaid.

604 – Support and Service Coordination

Support and Service Coordination is the provision of services to locate, manage, coordinate and monitor all covered supports and services, other program services, regardless of their funding source, and informal community supports for eligible children and their families. The Support and Service Coordinator, who is employed by County Human services Department, must assure that services are delivered in accordance with program requirements.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

615.10 Supported Employment - Individual

Supported Employment-Individual are the ongoing supports provided to a participant, who because of their disabilities, need intensive ongoing support to obtain and maintain an individual job in competitive, customized or self-employment in an integrated work setting in the general workforce. A participant receiving this service shall be compensated at or above the minimum wage, but not less than the customary wage and

level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. The outcome of this service is sustained paid employment at or above minimum wage in an integrated setting in the general workforce, in a job that meets personal and career goals. Individual employment support services are individualized and may include any combination of the following activities: vocational/job-related discovery or assessment, person-centered employment planning, job placement, job development, meeting with prospective employers, job analysis, training and systematic instruction, job coaching, job supports, work incentive benefits analysis and counseling, training and work planning, transportation and career advancement services. Also included are other workplace support services not specifically related to job skill training that enable the youth to be successful in integrating into the job setting. *For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

615.20 – Supported Employment – Small Group

Supported Employment-Small Group services are services and training activities provided in a regular business, industry or community setting for groups of two to eight workers with disabilities. Examples include mobile crews and other business-based workgroups employing small groups of workers with disabilities in employment in the community. Small group employment support must be provided in a manner that promotes integration into the workplace and integration between members and people without disabilities in those workplaces.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.10 – Supportive Home Care/Days

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Direct assistance with instrumental activities of daily living, as well as observation or cueing of the member to safely and appropriately complete activities of daily living and instrumental activities of daily living.

-Providing supervision necessary for safety at home and in the community. This may include observation to assure appropriate self-administration of medications, assistance with bill paying and other aspects of money management, assistance with communication, arranging and using transportation, checking out library books, ordering food from a menu, and paying for tickets to events.

-Intermittent major household tasks that must be performed seasonally or in response to some natural or other periodic event for reasons of health and safety or the need to assure the youth's continued community living.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.14 – Supportive Home Care/Days – Chore Services

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Intermittent major household tasks that must be performed seasonally or in response to some natural or other periodic event for reasons of health and safety or the need to assure the youth's continued community living.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.11 – Supportive Home Care/Days – Personal Care

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities

and personal needs and to assure adequate functioning and safety in their home and community.

-Direct assistance with instrumental activities of daily living, as well as observation or cueing of the member to safely and appropriately complete activities of daily living and instrumental activities of daily living.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.13 Supportive Home Care/Days – Routine Home Care Services

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Performance of household tasks and home maintenance activities, such as meal preparation, shopping, laundry, house cleaning, simple home repairs, snow shoveling, lawn mowing and running errands; assistance with packing and general house cleaning when a participant moves.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.12 – Supportive Home Care/Days – Supervision Services

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Providing supervision necessary for safety at home and in the community. This may include observation to assure appropriate self-administration of mediations, assistance with bill paying and other aspects of money management, assistance with communication, arranging and using transportation, checking out library books, ordering food from a menu, and paying for tickets to events.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.20 – Supportive Home Care/Hours

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Direct assistance with instrumental activities of daily living, as well as observation or cueing of the member to safely and appropriately complete activities of daily living and instrumental activities of daily living.

-Providing supervision necessary for safety at home and in the community. This may include observation to assure appropriate self-administration of mediations, assistance with bill paying and other aspects of money management, assistance with communication, arranging and using transportation, checking out library books, ordering food from a menu, and paying for tickets to events.

-Intermittent major household tasks that must be performed seasonally or in response to some natural or other periodic event for reasons of health and safety or the need to assure the youth's continued community living.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.24 – Supportive Home Care/Hours – Chore Services

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Intermittent major household tasks that must be performed seasonally or in response to some natural or other periodic event for reasons of health and safety or the need to assure the youth's continued community living.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that

is effective 04/01/2017 to 12/31/2021.

104.21 – Supportive Home Care/Hours – Personal Care

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Direct assistance with instrumental activities of daily living, as well as observation or cueing of the member to safely and appropriately complete activities of daily living and instrumental activities of daily living.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.23 Supportive Home Care/Hours – Routine Home Care Services

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

-Performance of household tasks and home maintenance activities, such as meal preparation, shopping, laundry, house cleaning, simple home repairs, snow shoveling, lawn mowing and running errands; assistance with packing and general house cleaning when a participant moves.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

104.22 – Supportive Home Care/Days – Supervision Services

Supportive Home Care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.

- -Providing supervision necessary for safety at home and in the community. This may include observation to assure appropriate self-administration of medications, assistance with bill paying and other aspects of money management, assistance with communication, arranging and using transportation, checking out library books, ordering food from a menu, and paying for tickets to events.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

113.20 – Training for Parents/Guardians and Families of Children with Disabilities

The training for parents/guardians and families of children with disabilities sessions provides support and training strategies to help reduce the stress, demands and challenges to successfully raise children with disabilities. The training sessions include a focus on techniques for supporting children with and without disabilities, keeping family balance and harmony in the home, and effective communication.

Parents/guardians, siblings and other family members are taught how stress affects individual family members and the family unit, and are provided techniques that can be used to work through difficult and stressful times. This service includes, but is not limited to, in-person training, conferences, resource materials, and on-line training sessions. Training includes the costs of registration and training fees associated with formal instruction in areas relevant to the needs identified in the child's support plan.

*For more specific requirements/limitations/exclusions see CLTS Waiver Manual & Children's Long-Term Support (CLTS) Waiver program Covered Services and Qualified Provider Requirements Excerpts from CMS Approved 1915(c) Home and Community-Based Services (HCBVS) Waiver 5-Year Renewal Application that is effective 04/01/2017 to 12/31/2021.

